

Signature of Applicant or Agent:

## City of Torrance Community Development Department, Building and Safety Division Sign Permit Application 3031 Torrance Blvd., Torrance CA 90503 (310) 618-5910

Required Inform Property/	ation									<b>↓</b>
Job Address:										] ]
Person Preparing This Form:					Date:					
Property Owner:					Owner Phone:					1
Owner's Address:										1
(if different) Business /					Phone :					
Tenant Name: Architect /					Phone:					
Engineer:				Filone.						
Architect / Engineer Address	:									
Contractor:				Contractor					Bus. Lic:	
(As shown on License) L Business Address:				License #:					Phone:	
Buomicoo / tuar coo.									1 110110.	
Valuation \$						Store Front	Width			
Descriptive Drawing of Sign 1:				Special Conditions						
Bookiparo Brawing or orgin 1.							□ non-illuminated			
								☐ illuminated☐ replacement face		
				Sign Area (Total Sq Ft)				□ painted wall/awning		
									a wanawiiiig	
Descriptive Drawing of Sign 2:			Specia	Special Conditions						
Descriptive Drawing of Sign 2.										
							□ illuminated			
							□ replacement face			
			Sign Area (Total Sq Ft)				□ painted wall/awning			
			orgin / irotal oq i ty			pained wainawining				
OTHER FEES THAT MAY A	APPLY CALCULATION	N	FE	E		<u> </u>	Note: If	Гепаnt Ос	cupied	$\overline{}$
Microfilm Fee Permit Docs: x \$ 6.70					Lac	I acknowledge that I am the owner of the above describe				ty and I
Plan Storage	# of sheets x	\$ 13.10			rea	ize that if this pe	this permit is issued, it will limit the number and size of signs e placed on this property and I consent to this application.			
Lamps	# lamps: x	\$ 3.30			VVIII	cir may be placed	u on this pri	operty and re	consent to this applic	auom.
Timer	# timers x	\$ 8.70								
Sign with Transformer or Ballast # signs x \$ 41.00					Print Name:					
Additional Transformer or Ballast # x \$ 14.10						Owner Address:				
Construction Tax valuation x 1.5% (.015)										
Workers' Comp Ins Review Fee			\$	3.40						
Fees Based on Project Valuation:					Owner Phone:					
Permit Fee							0	- Cit (	id)	_
Plan Check Fee  TOTAL PERMIT FEE					Owner Signature (required)					
	TOTAL	PERIVIII FEE								
RIGHT OF ENTRY										
I Certify that I have read this	• •				_		•	•		
relating to signs, and hereby ground sign, I affirm that the										
of Torrance Engineering Dep								•	•	· 1